Price Proposal Form E-1

Category 1 - Wireless Communication Antenna & Transmission Line Installation, Removal & Repair

County(ies):_____

1. Self-Supporting Tower:

2. Guyed Tower:

3. Monopole:

C. Total
$$(3A+3B = 3C)$$
 _____(3C)

4. Total
$$(1D+2D+3C=4A)$$
 _____(4A)

SUBMITTED BY:				
SIGNATURE	DATE	PRINTED NAME & TITLE		
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NAME OF OFFER	ROR (COMPANY)			

Price Proposal Form E-2A

Category 2 - Medium Intensity, Dual Tower Lighting System Installation - Per FAA Advisory Circular AC70/7460K

1 C-16 C	Calf Cyan antina Tayyan	County(ies):
1.	Self-Supporting Tower:	Fully-loaded Weight Hourly Crew Factor Rate
	A. FAA - E1 - Tower Height 20	1 - 350 Ft X .40 =
	B. FAA - E2 - Tower Height 35	1 - 500 Ft X .40 =
	C. FAA – F2 – Tower Height 50	1 – 700 Ft X .20 =
	D. Total (Add 1A+1B+1C =1D)	(1D
2.	Guyed Tower:	Fully-loaded Weight Hourly Crew Factor Rate
	A. FAA - E1 - Tower Height 20	1 - 350 Ft X .40 =
	B. FAA - E2 - Tower Height 35	1 - 500 Ft X .40 =
	C. FAA – F2 – Tower Height 50	1 – 700 Ft X .20 =
	D. Total (Add 2A+2B+2C =2D)	(2D
3.	Total (1D+2D= 3A)	(3A

Price Proposal Form E-2B Category 2 - Tower Lighting System Repair

SCHEDULED WORK (Self-Supporting Towe 1. Self-Supporting Tower (Hours Monday –	*	
	Fully-loaded Hourly Crew Rate	•
A. FAA – E1 – Tower Height – 201 -	350 FtX	.40 =
B. FAA – E2 - Tower Height - 351 –	500 FtX	.40 =
C. FAA – F2 – Tower Height - 501 –	700 FtX	.20 =
D. Total (Add 1A+1B+1C =1D)	-	(1D)
UN-SCHEDULED EMERGENCY CALL OU Items 2, 3 and 4)	T (Self-Supporti	ng Tower
2. Self-Supporting Tower (Hours Monday –	Friday 7am to 7	pm)
	Fully-loaded Hourly Crew Rate	Weight Factor
A. FAA – E1 – Tower Height – 201 -	350 Ft X	.40 =
B. FAA – E2 - Tower Height - 351 –	500 FtX	.40 =
C. FAA – F2 – Tower Height - 501 –	700 FtX	.20 =
Total (Add 2A+2B+2C =2D)		(2D)

3. <u>Self-Supporting Tower</u> (Hours Monday – Friday 7pm to 7am	3.	Self-Supporting	Tower (Hours	Monday - I	Friday 7pm	to 7am)
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Fully-loaded Weight Hourly Crew Factor Rate

A.
$$FAA - E1 - Tower Height - 201 - 350 Ft.$$
 X $.40 =$ _____

B.
$$FAA - E2 - Tower Height - 351 - 500 Ft.$$
 _____X .40 = ____

C.
$$FAA - F2 - Tower Height - 501 - 700 Ft.$$
 _____X $.20 =$ ____

D. Total (Add
$$3A+3B+3C = 3D$$
) _____(3D)

4. Self-Supporting Tower (Holidays and Weekends):

Fully-loaded Weight Hourly Crew Factor Rate

A.
$$FAA - E1 - Tower Height - 201 - 350 Ft.$$
 X $.40 = _____$

C.
$$FAA - F2 - Tower Height - 501 - 700 Ft.$$
 _____X $.20 =$ _____

SCHEDULED WORK (Guyed Tower Item 5)

5. <u>Guyed Tower</u> (Hours Monday – Friday 7am to 7pm):

Fully-loaded Weight Hourly Crew Factor Rate

A.
$$FAA - E1 - Tower Height - 201 - 350 Ft.$$
 X $.40 = _____$

B.
$$FAA - E2 - Tower Height - 351 - 500 Ft.$$
 _____X $.40 =$ _____

C.
$$FAA - F2 - Tower Height - 501 - 700 Ft.$$
 _____X $.20 =$ _____

UN-SCHEDULED EMERGENCY CALL OUT (Guyed Tower Items 6, 7 and 8)

6. Guyed Tower (Hours Monday – Friday 7am to 7pm):

Fully-loaded Weight Hourly Crew Factor Rate

A.
$$FAA - E1 - Tower Height - 201 - 350 Ft.$$
 X $.40 =$ _____

B.
$$FAA - E2 - Tower Height - 351 - 500 Ft.$$
 _____X .40 = ____

C.
$$FAA - F2 - Tower Height - 501 - 700 Ft.$$
 _____X $.20 =$ _____

7. Guyed Tower (Hours Monday – Friday 7pm to 7am):

Fully-loaded Weight Hourly Crew Factor Rate

A.
$$FAA - E1 - Tower Height - 201 - 350 Ft.$$
 _____ X $.40 =$ ____

C.
$$FAA - F2 - Tower Height - 501 - 700 Ft.$$
 _____X $.20 =$ _____

8. Guyed Tower (Holidays and Weekends):

Fully-loaded Weight Hourly Crew Factor Rate

D.
$$FAA - E1 - Tower Height - 201 - 350 Ft.$$
 _____ X $.40 =$ ____

E.
$$FAA - E2 - Tower Height - 351 - 500 Ft.$$
 _____X .40 = ____

F.
$$FAA - F2 - Tower Height - 501 - 700 Ft.$$
 _____X $.20 =$ ____

9. Total (Add
$$1D+2D+3D+4D+5D+6D+7D+8D=9A$$
) _____(9A)

Price Proposal Form E-2C Category 2 - Tower Lighting

	County(ies):	
		rom E-2A (Line 3A)
	2. Total Fi	rom E-2B (Line 9B)
	3. Add 3A	+9B= C3(C3)
SUBMITTED BY:		
SIGNATURE	DATE	PRINTED NAME & TITLE
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NAME OF OFFER	ROR (COMPANY)	

Price Proposal Form E-3 Functional Area 3 - Tower Inspection

County:(ies)_____

1. Self-Supporting Tower Flat Fee:

C. 376 Ft.+
$$X .10 =$$

2. Guyed Tower Flat Fee:

3. Monopole Flat Fee:

C. Total
$$(3A+3B = 3C)$$
 _____(3C)

4. Total
$$(1D+2D+3C=4A)$$
 _____(4A)

SUBMITTED BY:				
SIGNATURE	DATE	PRINTED NAME & TITLE		
FEDERAL EMPLO	OYER IDENTIFICA	TION#		
NAME OF OFFER	ROR (COMPANY)			

Price Proposal Form E-4 Category 4 – GENERATOR MAINTENANCE

	County(ies):
	Weight
	Factor
SCHEDULED WORK	
A. FULLY-LOADED HOURLY CREW RATE	X 94% = (A)
(HOURS Monday-Friday 7am to 7pm)	
EMERGENCY RATES(FOR UNSCHEDULED W	ORK):
B. FULLY-LOADED CALL-OUT CREW RATE	X 2% = (B)
(HOURS Monday - Friday 7am to 7pm)	
C. FULLY-LOADED CALL-OUT CREW RATE	X 2% = (C)
(HOURS Monday - Friday 7pm to 7am)	
D. FULLY-LOADED CALL-OUT CREW RATE	X 2% = (D)
(HOURS HOLIDAYS and WEEKENDS)	
E. TOTALADD (A) $+(B)+(C)+(D) = (E)$	(E)
SUBMITTED BY:	
SIGNATURE DATE PRIN	TED NAME & TITLE
FEDERAL EMPLOYER IDENTIFICATION #	
NAME OF OFFEROR (COMPANY)	

Price Proposal Form E-5 Category 5 - Tower Site Up-Keep

		County(ies):
	OADED HOURLY RA S Monday-Friday 7a	
SUBMITTED BY:		
SIGNATURE	DATE	PRINTED NAME & TITLE
FEDERAL EMPLO	OYER IDENTIFICA	TION#
NAME OF OFFEI	ROR (COMPANY)	

Price Proposal Form E-6 Category 6 - TOWER SITE AUDIT

		County(ies):
	OADED HOURLY R S Monday-Friday 7a	· · · · · · · · · · · · · · · · · · ·
SUBMITTED BY:		
SIGNATURE	DATE	PRINTED NAME & TITLE
FEDERAL EMPLO	OYER IDENTIFICA	ATION #
NAME OF OFFEI	ROR (COMPANY)	